

PUBLIC SCHOOLS					
APPLICATION FOR EDUCATIONAL LEVEL PROMOTION					
Name:					
Mailing Address:					
City, State, Zip:					
Contact Number:		Alt. Contact:			
Email:		EMPLID:			
Location:		Position:			
Please complete the following portion if you are employed in a <b>Washington Teachers' Union (WTU)</b> position and are classified <b>ET-15</b> . (Check one)  Bachelor's degree + 15 graduate-level semester hours					
	ee/Bachelor's degree + 30 gradua				
Master's degree + 30 graduate-level semester hours (beyond the date of the Master's)					
Doctoral degree/Master's degree + 60 graduate-level semester hours (beyond the date of the Master's)					
Please complete the following portion if you are employed in a Council of School Officers (CSO) position and are classified ET Officer (with the exception of employees who are Grade 61, 62, 63, 64, 65, 66, 81, 82 and 83). (Check one)  Master's degree + 45 graduate-level semester hours (beyond the date of the Master's)					
Doctoral degre		iours (beyond the date of the	ie Master 3)		
Doctoral degree					
Official transcripts bearing the seal and signature of the registrar <u>must</u> be attached to this application and sent to the address listed below Attention: Compensation Team, Human Resources, 10 <sup>th</sup> Floor. Educational Level Promotions take 3-4 pay periods to be reflected on your paycheck.  Educational Level Promotions are not processed during the summer months (June-August) as not to alter Summer Pay Credit (SPC).					
	ring the summer are processed immediate				
FOR HUMAN RESOURCES USE ONLY					
EMPLID		Received			
Position #		Reviewed			
Current SVC		Submitted (Budget)			
New SVC		Processed in PeopleSoft			
Effective Date		Retro date			
Approved/Denied		HR Specialist			
If denied, please provide e	xplanation:				

RECORD ATTENDANCE AT ALL SCHOOLS ABOVE HIGH SCHOOL LEVEL					
Date of Attendance	Collage/ University	Degree & Date awarded	Are the transcripts previously submitted?  [Yes/No]		
LIST OF ALL GRADUATE CREDITS APPLICABLE TO THIS PROMOTION					
College/ University	COURSE NUMBER	Course Title	Graduate Semester/ Quarter Hours		
Please ensure the application reviewing and processing of		. Incomplete sections can resu	It in additional delays in		
Employee Signature Date			Date		